

Fire Alarm Certificates Forms

118 Parade Street
Providence, RI 02909

Photo

Copy License

Here

Date: _____

Name: _____
(Company or Individual)

Address: _____

City/Town: _____ State: _____ Zip: _____

License # _____

Check # _____ Amount: _____
Payable to RIAFC

Person Picking Up Forms

Print Name: _____

Signature: _____

Certificate # (_____) Through (_____)

Office Use Only, Do Not Write In This Space

Photo Copy Check Here